Fill in th	is information to identi	y your case:		
Debtor 1	Jerry L Jenkins		_	
Debtor 2	First Name	Middle Name	Last Name	
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court for the:	SOUTHERN DIST	FRICT OF MISSISSIPPI, SOUTHERN DIVISION	
Case number _ (if known)				☐ Check if this is an amended filing
Official Fo Statemer		n for Indiv	/iduals Filing Under Chapt	er 7 12/15
■ creditors have■ you have leas	vidual filing under chap e claims secured by you ed personal property a s form with the court wi	ur property, or nd the lease has no		for the meeting of creditors.
	ver is earlier, unless the		time for cause. You must also send copies to the	
•	ople are filing together te the form.	in a joint case, botl	n are equally responsible for supplying correct info	ormation. Both debtors must sign
	and accurate as possible our name and case num		needed, attach a separate sheet to this form. On the	e top of any additional pages,
Part 1: List Yo	our Creditors Who Have	Secured Claims		
1. For any creditorinformation be		rt 1 of Schedule D:	Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the
	editor and the property the	nat is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's C	amp Shelby Federa	Credit Union	☐ Surrender the property. ☐ Retain the property and redeem it.	■ No
Description of	2016 Nissan Altim	a	Retain the property and enter into a <i>Reaffirmation Agreement</i> .	☐ Yes
property securing debt:			☐ Retain the property and [explain]:	_
Creditor's C	capital One Auto Fina	ance	☐ Surrender the property.	■ No
name:	•		☐ Retain the property and redeem it. ☐ Retain the property and enter into a <i>Reaffirmation</i>	
Description of property	2016 Kia Forte		Agreement. Agreement.	
securing debt:			Retain the property and [explain]: Surrender to co-debtor	_
Creditor's O	nemain Financial		☐ Surrender the property.	□ No
name:			☐ Retain the property and redeem it.	■ Vee
Description of	Household Goods		☐ Retain the property and enter into a <i>Reaffirmation</i> Agreement.	Yes
property securing debt:	Lawnmower, Ruge (each	er pistol, etc.	■ Retain the property and [explain]: avoid lien using 11 U.S.C. § 522(f)	_

Statement of Intention for Individuals Filing Under Chapter 7

Official Form 108

Debtor 1	Jenkins, Jerry L		Case number (if known)	
propert	ption of Household Good	☐ Retain the Retain t	er the property. the property and redeem it. the property and enter into a Reaffirmation tent. the property and [explain]: the property and [explain]: the using 11 U.S.C. § 522(f)	□ No ■ Yes
Securii	ig debt. •	avoiu ile	ii using 11 0.3.0. § 322(1)	
or any u he inforn	nation below. Do not list real	lease that you listed in Schedule G	: Executory Contracts and Unexpired Le e leases that are still in effect; the lease of assume it. 11 U.S.C. § 365(p)(2).	eases (Official Form 106G), fill in period has not yet ended. You
Describe	your unexpired personal pro	operty leases	V	Vill the lease be assumed?
Lessor's r Description Property:	name: on of leased			□ No □ Yes
Lessor's r Description Property:	name: on of leased			□ No □ Yes
Lessor's r Description Property:	name: on of leased			□ No □ Yes
Lessor's r Description Property:	name: on of leased			□ No □ Yes
Lessor's r Description Property:	name: on of leased			□ No □ Yes
Lessor's r Description Property:	name: on of leased			□ No □ Yes
Lessor's r Description Property:	name: on of leased			□ No
Part 3:	Sign Below			
	nalty of perjury, I declare tha that is subject to an unexpire		out any property of my estate that secure	es a debt and any personal
χ /s/ .	Jerry L Jenkins		X	
Jer	ry L Jenkins nature of Debtor 1		Signature of Debtor 2	
Date	October 31, 2019		Date	

Official Form 108

Debtor		no initorination to labilit	ify your case and this filing:			
	· 1	Jerry L Jenkins				
		First Name	Middle Name	Last Name		
Debtor (Spouse,		First Name	Middle Name	Last Name		
			COLITIEDNI DISTRICT OF		CION	
United	States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT OF	MISSISSIPPI, SOUTHERN DIVI	SION	
Case n	number _					☐ Check if this is an amended filing
						9
∩ff: a	ial Ea	rm 1061/D				
		orm 106A/B				
Sch	<u>iedul</u>	le A/B: Prop	perty			12/15
think it f informat	its best. E	Be as complete and accura re space is needed, attach	ate as possible. If two married pe	. If an asset fits in more than one of cople are filing together, both are en the top of any additional pages, v	qually responsible for supp	olying correct
Part 1:	Describe	Each Residence, Building	g, Land, or Other Real Estate Yo	u Own or Have an Interest In		
l. Do yo	ou own or	have any legal or equitabl	e interest in any residence, build	ling, land, or similar property?		
`			•			
_	o. Go to Pa					
☐ Ye	es. Where	is the property?				
Part 2:	Describe	Your Vehicles				
3. Cars		ucks, tractors, sport ut	ility vehicles, motorcycles			
■ Ye	es					
	es Make:	Nissan	Who has an interest	in the property? Check one	Do not deduct secured cla	
3.1	Make:			in the property? Check one	the amount of any secured	d claims on Schedule D:
3.1		Nissan Altima 2016	Who has an interest Debtor 1 only Debtor 2 only	in the property? Check one	the amount of any secured Creditors Who Have Claim	d claims on Schedule D: ns Secured by Property.
3.1	Make:	Altima 2016	Debtor 1 only	, , ,	the amount of any secured	d claims on Schedule D:
3.1	Make: Model: Year: Approxima Other infor	Altima 2016 tte mileage: 111 mation:	Debtor 1 only Debtor 2 only	or 2 only	the amount of any secured Creditors Who Have Claim Current value of the	d claims on Schedule D: ns Secured by Property. Current value of the
3.1	Make: Model: Year: Approxima Other infor	Altima 2016 tte mileage: 11	Debtor 1 only Debtor 2 only Debtor 1 and Debt	or 2 only debtors and another	the amount of any secured Creditors Who Have Claim Current value of the	d claims on Schedule D: ns Secured by Property. Current value of the
3.1	Make: Model: Year: Approxima Other infor	Altima 2016 Ite mileage: 111 mation: 1,000 miles	Debtor 1 only Debtor 2 only Debtor 1 and Debt At least one of the Check if this is co	or 2 only debtors and another ommunity property	the amount of any secured Creditors Who Have Claim Current value of the entire property?	d claims on Schedule D: ns Secured by Property. Current value of the portion you own? \$9,700.00
3.1	Make: Model: Year: Approxima Other infor with 111 Make:	Altima 2016 Ite mileage: 111 mation: 1,000 miles Kia	Debtor 1 only Debtor 2 only Debtor 1 and Debt At least one of the Check if this is co (see instructions) Who has an interest	or 2 only debtors and another	the amount of any secured Creditors Who Have Claim Current value of the entire property? \$9,700.00 Do not deduct secured clathe amount of any secured.	d claims on Schedule D: ns Secured by Property. Current value of the portion you own? \$9,700.00 ims or exemptions. Put d claims on Schedule D:
3.1	Make: Model: Year: Approxima Other infor with 111 Make: Model:	Altima 2016 Ite mileage: 112 mation: 1,000 miles Kia Forte	Debtor 1 only Debtor 2 only Debtor 1 and Debt At least one of the Check if this is co (see instructions) Who has an interest Debtor 1 only	or 2 only debtors and another ommunity property	the amount of any secured Creditors Who Have Claim Current value of the entire property? \$9,700.00 Do not deduct secured claim the amount of any secured Creditors Who Have Claim	d claims on Schedule D: ns Secured by Property. Current value of the portion you own? \$9,700.00 ims or exemptions. Put d claims on Schedule D: ns Secured by Property.
3.1	Make: Model: Year: Approxima Other infor with 111 Make: Model: Year:	Altima 2016 Ite mileage: 111 mation: 1,000 miles Kia	Debtor 1 only Debtor 2 only Debtor 1 and Debt At least one of the Check if this is co (see instructions) Who has an interest	or 2 only debtors and another pmmunity property in the property? Check one	the amount of any secured Creditors Who Have Claim Current value of the entire property? \$9,700.00 Do not deduct secured clathe amount of any secured.	d claims on Schedule D: ns Secured by Property. Current value of the portion you own? \$9,700.00 ims or exemptions. Put d claims on Schedule D:
3.1	Make: Model: Year: Approxima Other infor with 111 Make: Model: Year:	Altima 2016 tte mileage: 111 mation: 1,000 miles Kia Forte 2016 tte mileage: 2016	Debtor 1 only Debtor 2 only Debtor 1 and Debt At least one of the Check if this is co (see instructions) Who has an interest Debtor 1 only Debtor 2 only	or 2 only debtors and another ommunity property in the property? Check one	the amount of any secured Creditors Who Have Claim Current value of the entire property? \$9,700.00 Do not deduct secured claim the amount of any secured Creditors Who Have Claim Current value of the	d claims on Schedule D: ns Secured by Property. Current value of the portion you own? \$9,700.00 ims or exemptions. Put d claims on Schedule D: ns Secured by Property. Current value of the
3.1	Make: Model: Year: Approxima Other infor with 111 Make: Model: Year: Approxima	Altima 2016 tte mileage: 111 mation: 1,000 miles Kia Forte 2016 tte mileage: 2016	Debtor 1 only Debtor 2 only Debtor 1 and Debt At least one of the Check if this is co (see instructions) Who has an interest Debtor 1 only Debtor 2 only Debtor 1 and Debt	or 2 only debtors and another pmmunity property in the property? Check one or 2 only debtors and another	the amount of any secured Creditors Who Have Claim Current value of the entire property? \$9,700.00 Do not deduct secured claim the amount of any secured Creditors Who Have Claim Current value of the	d claims on Schedule D: ns Secured by Property. Current value of the portion you own? \$9,700.00 ims or exemptions. Put d claims on Schedule D: ns Secured by Property. Current value of the
3.1 3.2	Make: Model: Year: Approxima Other infor with 111 Make: Model: Year: Approxima Other infor	Altima 2016 Ite mileage: 117 mation: 1,000 miles Kia Forte 2016 Ite mileage: mation:	Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debt At least one of the Check if this is co (see instructions) Who has an interest Debtor 1 only Debtor 2 only Debtor 1 and Debt At least one of the Check if this is co (see instructions)	or 2 only debtors and another pmmunity property in the property? Check one or 2 only debtors and another	the amount of any secured Creditors Who Have Claim Current value of the entire property? \$9,700.00 Do not deduct secured clathe amount of any secured Creditors Who Have Claim Current value of the entire property? \$7,000.00	d claims on Schedule D: as Secured by Property. Current value of the portion you own? \$9,700.00 ims or exemptions. Put d claims on Schedule D: as Secured by Property. Current value of the portion you own?

Official Form 106A/B Schedule A/B: Property page 1

Del	otor 1	Jenkins, Jer	ry L Case numb	er (if known) _	
			the portion you own for all of your entries from Part 2, including any entries Part 2. Write that number here=>		\$16,700.00
Par	t 3: De	escribe Your Perso	nal and Household Items		
			egal or equitable interest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
ĺ	<i>Examp</i> ☐ No	,	urnishings des, furniture, linens, china, kitchenware		
	■ Yes.	Describe	Household Goods, Furniture, Lawnmower, Ruger pistol, etc. (each item is worth less than \$200.00)		\$1,200.00
[□ No	<i>les:</i> Televisions an	d radios; audio, video, stereo, and digital equipment; computers, printers, scanners; phones, cameras, media players, games TVs, DVD Player, PC, Cell Phone, etc. (each item is worth less	music collectio	ns; electronic devices
			than \$200.00)		\$500.00
9. E	■ No □ Yes. Equipm Exampl ■ No □ Yes. Firearr	collections, m Describe nent for sports an les: Sports, photog instruments Describe	graphic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis;		
_	□ No		, shotguns, ammunition, and related equipment		
	■ Yes.	Describe	Remington shotgun		\$100.00
[□ No Î		thes, furs, leather coats, designer wear, shoes, accessories Clothing		\$300.00
			Clothing		<u> </u>
13.	■ No □ Yes. Non-fa		relry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches,	gems, gold, silv	ver
_		Describe			
ı	No	ther personal and	I household items you did not already list, including any health aids you did	not list	

Official Form 106A/B Schedule A/B: Property page 2

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Debtor 1	Jenkins, Jerry L	Case number (if known)	
	d the dollar value of all of your entries from Part 3 t 3. Write that number here	3, including any entries for pages you have attached for	\$2,100.00
5. / ·	B	_	
	Describe Your Financial Assets own or have any legal or equitable interest in any	of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
□ No	<i>mples:</i> Money you have in your wallet, in your home, ir	n a safe deposit box, and on hand when you file your petition	
■ Ye	S	Cash-on-hand	\$535.00
	institutions. If you have multiple accounts wit	,	es, and other similar
■ Ye	s	Institution name:	
	17.1. Checking Accoun	t Camp Shelby Federal Credit Union	\$0.66
	17.2. Savings Account	Camp Shelby Federal Credit Union	\$1.00
Exai ■ No			
☐ Ye	s Institution or issuer nan	ne:	
	t venture	ed and unincorporated businesses, including an interest in	an LLC, partnership, and
	s. Give specific information about them Name of entity:	% of ownership:	
Neg	ernment and corporate bonds and other negotiab totiable instruments include personal checks, cashiers engotiable instruments are those you cannot transfer	checks, promissory notes, and money orders.	
	s. Give specific information about them Issuer name:		
	•	b), thrift savings accounts, or other pension or profit-sharing pla	ans
■ Ye	s. List each account separately.	la stitution in annual	
	Type of account: 401(k) or Similar Plan	Institution name: PERS through employer	unknown
	401(k) or Similar Plan	Deferred comp plan through employer	unknown
Your		you may continue service or use from a company c utilities (electric, gas, water), telecommunications companies, o	or others

Institution name or individual: ☐ Yes.

Official Form 106A/B Schedule A/B: Property page 3

De	ebtor 1 Jenkins, J e	erry L		Case number (if known)	
23.	Annuities (A contract	for a periodic payme	nt of money to you, either for life or for a number of ye	ars)	
		Issuer name and de	escription.		
24.	Interests in an educat 26 U.S.C. §§ 530(b)(1)		ount in a qualified ABLE program, or under a qual	ified state tuition program.	
		Institution name and	description. Separately file the records of any interest	ts.11 U.S.C. § 521(c):	
25.	Trusts, equitable or f	uture interests in բ	property (other than anything listed in line 1), and	rights or powers exercisabl	e for your benefit
	☐ Yes. Give specific i	nformation about th	em		
26.			secrets, and other intellectual property es, proceeds from royalties and licensing agreements		
	☐ Yes. Give specific i	nformation about th	em		
27.	_		intangibles nses, cooperative association holdings, liquor licenses	s, professional licenses	
	■ No □ Yes. Give specific i	nformation about th	em		
M	oney or property owed	l to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds owed to ☐ No ☐ Yes. Give specific in	-	n, including whether you already filed the returns and	the tax years	
			2018 state tax refund & pro rata portion o 2019 state tax refund, if any.	f State	\$5,000.00
			2018 earned income credit & pro rata portion of 2019 earned income credit if any.	Federal	\$5,000.00
			2018 federal tax refund & pro rata portion of 2019 federal tax refund, if any.	Federal	\$5,000.00
30.	■ No □ Yes. Give specific in Other amounts some Examples: Unpaid wa unpaid loa ■ No □ Yes. Give specific ir	formation cone owes you ges, disability insura ans you made to so nformation e policies	v, spousal support, child support, maintenance, divorunce payments, disability benefits, sick pay, vacation preone else	ay, workers' compensation, S	
	■ No	ance company of ea	ch policy and list its value.		Surrender or refund
		Company n	ame: Beneficia	ary.	Surrender or refund value:

Official Form 106A/B Schedule A/B: Property page 4

Deb	otor 1	Jenkins, Jerry L		Case number (if known)	
32.		terest in property that is due you from someone who has are the beneficiary of a living trust, expect proceeds from a life i		currently entitled to receive	property because someone has
ı	No				
	☐ Yes.	Give specific information			
_	Exam	s against third parties, whether or not you have filed a law ples: Accidents, employment disputes, insurance claims, or rig		d for payment	
_	■ No □ Yes	Describe each claim			
		contingent and unliquidated claims of every nature, include	ling counterclaims of	the debter and rights to	eat off claims
_	■ No	contingent and uninquidated claims of every flature, includ	ing counterclaims of	the debtor and rights to s	et on ciains
_		Describe each claim			
	-	nancial assets you did not already list			
_	■ No □ Yes.	Give specific information			
		·			
36.		the dollar value of all of your entries from Part 4, includinç 4. Write that number here			\$15,536.66
Par	t 5: De	escribe Any Business-Related Property You Own or Have an Inter	est In. List any real esta	te in Part 1.	
37. I	Do vou	own or have any legal or equitable interest in any business-relate	ed property?		_
_		o to Part 6.			
	Yes. 0	Go to line 38.			
Par	t 6: De	escribe Any Farm- and Commercial Fishing-Related Property You	Own or Have an Interes	t In.	
		ou own or have an interest in farmland, list it in Part 1.			
46.	Do you	u own or have any legal or equitable interest in any farm-	or commercial fishing	-related property?	
	No.	Go to Part 7.			
	☐ Yes	s. Go to line 47.			
		_			
Par	t 7:	Describe All Property You Own or Have an Interest in That You	I Did Not List Above		
53.		have other property of any kind you did not already list? poles: Season tickets, country club membership			
	No				
Ĺ	☐ Yes.	Give specific information			
54.	Add 1	the dollar value of all of your entries from Part 7. Write tha	t number here		\$0.00
Par	t 8:	List the Totals of Each Part of this Form			
55.	Part '	1: Total real estate, line 2			\$0.00
56.		2: Total vehicles, line 5	\$16,700.00		
57.	Part 3	3: Total personal and household items, line 15	\$2,100.00		
58.	Part 4	4: Total financial assets, line 36	\$15,536.66		
59.	Part :	5: Total business-related property, line 45	\$0.00		
60.	Part (6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7	7: Total other property not listed, line 54 +	\$0.00		
62.	Total	personal property. Add lines 56 through 61	\$34,336.66	Copy personal property to	stal \$34,336.66
63.	Total	of all property on Schedule A/B. Add line 55 + line 62			\$34,336.66

Official Form 106A/B Schedule A/B: Property page 5

	Fill in this inform	nation to identify you	ır case:						
De		ry L Jenkins]			
De	First ebtor 2	Name	Middle Name	L	ast Name				
	ouse if, filing) First	Name	Middle Name	L	ast Name				
Un	nited States Bankruptc	Court for the: SO	UTHERN DISTRICT OF	MISSI	SSIPPI, SOUTHERN DIVISION				
	ase number known)					Check if this is an amended filing			
\sim	fficial Form 1	060							
	fficial Form 1			•	-				
<u>></u>	cneaule C:	The Prope	erty You Cla	ım	as Exempt	4/19			
oro _l out	perty you listed on <i>Sch</i>	edule A/B: Property(O	fficial Form 106A/B) as yo	ur sou	irce, list the property that you claim a	oplying correct information. Using the s exempt. If more space is needed, fill s, write your name and case number (if			
app un o a	ecific dollar amount a plicable statutory limi ds—may be unlimite	s exempt. Alternative t. Some exemptions- d in dollar amount. Ho ount and the value of	ly, you may claim the fu –such as those for healt owever, if you claim an e	II fair h aids exemp	s, rights to receive certain benefits	g exempted up to the amount of any s, and tax-exempt retirement under a law that limits the exemption			
Pa	rt 1: Identify the P	roperty You Claim as	Exempt						
1.	Which set of exemp	tions are you claimin	g? Check one only, even	if you	r spouse is filing with you.				
	■ You are claiming s	tate and federal nonbar	nkruptcy exemptions. 11 l	J.S.C	. § 522(b)(3)				
	☐ You are claiming for	ederal exemptions. 11	U.S.C. § 522(b)(2)						
2.	For any property yo	or any property you list on Schedule A/B that you claim as exempt, fill in the information below.							
				Current value of the Amount of the exemption you claim portion you own		Specific laws that allow exemption			
	Consulting the state of the sta	, and property	Copy the value from Schedule A/B	Che	eck only one box for each exemption.				
	Nissan Altima		\$9,700.00		\$0.00	Miss. Code Ann. § 85-3-1(a), (d)			
	2016 111000 Line from Schedule A	√B 3.1			100% of fair market value, up to any applicable statutory limit	(3)			
	Household Good	s, Furniture, jer pistol, etc. (eac	\$1,200.00		\$1,200.00	Miss. Code Ann. § 85-3-1(a),			
	item is worth less Line from Schedule A	s than \$200.00)			100% of fair market value, up to any applicable statutory limit	(d)			
	TVs, DVD Player, etc. (each item is		\$500.00		\$500.00	Miss. Code Ann. § 85-3-1(a), (d)			
	\$200.00) Line from Schedule A				100% of fair market value, up to any applicable statutory limit	(-)			
	Remington shoto		\$100.00		\$100.00	Miss. Code Ann. § 85-3-1(a), (d)			
		Line Hotti Schiedule AVD. 10.1					100% of fair market value, up to any applicable statutory limit	\-'\	
	Clothing Line from Schedule A	√B: 11.1	\$300.00	•	\$300.00	Miss. Code Ann. § 85-3-1(a), (d)			

Official Form 106C

100% of fair market value, up to any applicable statutory limit

Brief description of the property and line on Schedule A/B that lists this property		Current value of the portion you own			Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
	Cash-on-hand Line from Schedule A/B 16.1	\$535.00		\$535.00	Miss. Code Ann. § 85-3-1(a), (d)	
				100% of fair market value, up to any applicable statutory limit		
	PERS through employer Line from Schedule A/B 21.1	Unknown			Miss. Code Ann. § 85-3-1(e)	
	Line Iron Schedule A/D 21.1			100% of fair market value, up to any applicable statutory limit		
	Deferred comp plan through employer	Unknown			Miss. Code Ann. § 85-3-1(e)	
	Line from Schedule A/B 21.2			100% of fair market value, up to any applicable statutory limit		
	2018 state tax refund & pro rata portion of 2019 state tax refund, if	\$5,000.00		\$5,000.00	Miss. Code Ann. § 85-3-1(k)	
	any. Line from Schedule A/B 28.1			100% of fair market value, up to any applicable statutory limit		
	2018 earned income credit & pro rata portion of 2019 earned income	\$5,000.00		\$5,000.00	Miss. Code Ann. § 85-3-1(i)	
	credit, if any. Line from Schedule A/B 28.2			100% of fair market value, up to any applicable statutory limit		
	2018 federal tax refund & pro rata portion of 2019 federal tax refund, if	\$5,000.00		\$5,000.00	Miss. Code Ann. § 85-3-1(j)	
	any. Line from Schedule A/B 28.3			100% of fair market value, up to any applicable statutory limit		
3.	Are you claiming a homestead exemption of			on or after the date of adjustment \		
	(Subject to adjustment on 4/01/22 and every 3 ■ No	years after that for case	s mea	on or after the date or adjustment.)		
	☐ Yes. Did you acquire the property covered	d by the exemption within	n 1,21	5 days before you filed this case?		
	□ No					
	☐ Yes					

Official Form 106C

Fill in thi	s information to ident	ify your case:			
Debtor 1	Jerry L Jenkins				
	First Name	Middle Name Last Name		}	
Debtor 2 (Spouse if, filing)	First Name	Middle Name Last Name			
United States Ba	nkruptcy Court for the:	SOUTHERN DISTRICT OF MISSISSIPPI, S	OUTHERN DIVISION		
Case number _				☐ Check	if this is an
(ii kilowii)					ded filing
					aca ming
Official Forn	n 106D				
Schedule	D: Creditors	Who Have Claims Secure	d by Property	/	12/15
Be as complete and	d accurate as possible. If	f two married people are filing together, both are eg	ually responsible for sup	plying correct informat	ion. If more space is
needed, copy the A		number the entries, and attach it to this form. On t			
known). 1. Do any croditors	have claims secured by	your property?			
-	•	s form to the court with your other schedules. You	, have nothing also to ron	part on this form	
_			i nave nothing else to rep	ort on this form.	
■ Yes. Fill in	all of the information be	elow.			
Part 1: List A	II Secured Claims		Column A	Column B	Column C
		nore than one secured claim, list the creditor separately a particular claim, list the other creditors in Part 2. As	Amount of claim	Value of collateral	Unsecured
		eal order according to the creditor 's name.	Do not deduct the	that supports this	portion
Camp Sh	olby Fodoral		value of collateral.	claim	If any
Credit Un	elby Federal	Describe the property that secures the claim:	\$13,030.00	\$9,700.00	\$3,330.00
Creditor's Name		2016 Nissan Altima			
		with 111,000 miles			
Warahau	oo Ayo Dida 92	As of the date you file, the claim is: Check all that			
	se Ave Bldg 82 elby, MS 39407	apply. Contingent			
-	t, City, State & Zip Code	☐ Unliquidated			
	,,,,	☐ Disputed			
Who owes the de	ebt? Check one.	Nature of lien. Check all that apply.			
■ Debtor 1 only		\square An agreement you made (such as mortgage or se	cured		
Debtor 2 only		car loan)			
Debtor 1 and De	ebtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
_	he debtors and another	☐ Judgment lien from a lawsuit			
Check if this cl community de		Other (including a right to offset) Car Loan			

Last 4 digits of account number

0022

Date debt was incurred 2019-04-19

Debtor 1 Jerry L Jenkins		Case number (if known)			
First Name Middle N	lame Last Name				
Capital One Auto	Describe the property that secures the claim:	\$10,579.00	\$7,000.00	\$3,579.00	
Creditor's Name	2016 Kia Forte				
Attn: Bankruptcy					
PO Box 30285	As of the date you file, the claim is: Check all that				
Salt Lake City, UT	apply.				
84130-0285	☐ Contingent				
Number, Street, City, State & Zip Code	☐ Unliquidated				
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.				
Debtor 1 only	☐ An agreement you made (such as mortgage or sec	ured			
Debtor 2 only	car loan)				
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)				
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this claim relates to a community debt	Other (including a right to offset) Co-signed	vehicle loan			
Date debt was incurred 2017-06	Last 4 digits of account number 1001				
2.3 Onemain Financial	Describe the property that secures the claim:	\$4,951.00	\$1,200.00	\$3,751.00	
Creditor's Name	Household Goods, Furniture,				
	Lawnmower, Ruger pistol, etc.				
Attn: Bankruptcy	(each item is worth less than				
PO Box 3251	\$200.00) As of the date you file, the claim is: Check all that				
Evansville, IN	apply.				
47731-3251	☐ Contingent				
Number, Street, City, State & Zip Code	☐ Unliquidated				
	☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
■ Debtor 1 only	☐ An agreement you made (such as mortgage or sec	ured			
Debtor 2 only	car loan)				
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)				
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this claim relates to a community debt	Other (including a right to offset) Household	goods loan			
Date debt was incurred 2015-03	Last 4 digits of account number 2264				
2.4 Republic Finance LLC	Describe the property that secures the claim:	\$2,344.00	\$1,200.00	\$2,344.00	
Creditor's Name	Household Goods, Furniture,				
	Lawnmower, Ruger pistol, etc.				
	(each item is worth less than				
282 Tower Rd	\$200.00)				
Ponchatoula, LA	As of the date you file, the claim is: Check all that apply.				
70454-8318	Contingent				
Number, Street, City, State & Zip Code	☐ Unliquidated				
	☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only	☐ An agreement you made (such as mortgage or sec	ured			
Debtor 2 only	car loan)				
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)				
At least one of the debtors and another	☐ Statutory lief (such as tax lief), mechanics lief) ☐ Judgment lien from a lawsuit				
☐ Check if this claim relates to a		goods loan			
community debt	Other (including a right to offset) Household	30003 10011			
Date debt was incurred 2017-12	Last 4 digits of account number 0435				

Debto	or 1 Jerry L Jenkins	Case	e number (f known)
	First Name Middle Name Last Name		
Add tl	ne dollar value of your entries in Column A on this page. Write that number he	re:	\$30,904.00
	is the last page of your form, add the dollar value totals from all pages. that number here:		\$30,904.00
Part 2	List Others to Be Notified for a Debt That You Already Listed		
rying han c	nis page only if you have others to be notified about your bankruptcy for a deb to collect from you for a debt you owe to someone else, list the creditor in Par one creditor for any of the debts that you listed in Part 1, list the additional cred in Part 1, do not fill out or submit this page.	rt 1, and then li	ist the collection agency here. Similarly, if you have more
	Name, Number, Street, City, State & Zip Code Brad D. Wilkinson	On which lin	ne in Part 1 did you enter the creditor?
	Wilkinson Law Firm, P.C.	Last 4 digits	of account number 2264
	511 Keywood Cir Flowood, MS 39232-3019		
	Name, Number, Street, City, State & Zip Code	On which lin	ne in Part 1 did you enter the creditor? 2.1
	Camp Shelby Federal Credit Union C/O Denise Collier, CEO/Manager		of account number 0022
	Warehouse Ave Bldg 82 Hattiesburg, MS 39407		
	Name, Number, Street, City, State & Zip Code	On which lir	ne in Part 1 did you enter the creditor?
	Capital One C/O Richard Fairbank CEO 3901 N Dallas Pkwy	Last 4 digits	of account number
	Dallas, TX 75093		
	Name, Number, Street, City, State & Zip Code	On which lin	ne in Part 1 did you enter the creditor?
	Capital One Auto Finance (r) 4515 N Santa Fe Ave Oklahoma City, OK 73118-7901	Last 4 digits	of account number 1001
	Name, Number, Street, City, State & Zip Code	On which lir	ne in Part 1 did you enter the creditor? 2.3
	Onemain PO Box 1010 Evansville, IN 47706-1010	Last 4 digits	of account number 2264
	Name, Number, Street, City, State & Zip Code	On which lin	ne in Part 1 did you enter the creditor? 2.3
	OneMain Financial C/O C T Corporation System		of account number 2264
	645 Lakeland East Dr Ste 101 Flowood, MS 39232-9099		
	Name, Number, Street, City, State & Zip Code	On which lin	ne in Part 1 did you enter the creditor?
	Republic Finance LLC C/O Capitol Corporate Services, Inc 248 E Capitol St Ste 840 Jackson, MS 39201-2505	Last 4 digits	of account number 0435

Fill in this inf	formation to identify you	r case:				
		i dasc.				
Debtor 1	Jerry L Jenkins First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT	OF MISSISSIPPI, SOU	THERN DIVISION		
Case number						
(if known)					☐ Check	if this is an
					amend	ed filing
Official Forr	m 106F/F					
	E/F: Creditors W	ho Have Unseci	red Claims			12/15
Part 1: List A 1. Do any credit No. Go to I Yes. 2. List all of you identify what to possible, list the first than the fir	All of Your PRIORITY Uns	d claims against you? If a creditor has more than a both priority and nonpriority r according to the creditor 's ar claim, list the other creditor	one priority unsecured clain r amounts, list that claim he name. If you have more tha rs in Part 3.	n, list the creditor separatel re and show both priority a n two priority unsecured cla	y for each claim. For e nd nonpriority amounts aims, fill out the Contin	ach claim listed, s. As much as uation Page of Part
				Total claim	Priority amount	Nonpriority amount
2.1 IRS		Last 4 digits o	f account number	\$2,800.00	\$2,800.00	\$0.00
Centra PO Bo Philade	elphia, PA 19101-734	6	debt incurred?		-	
	Street City State Zip Code	_	you file, the claim is: Che	ck all that apply		
_	ed the debt? Check one.	☐ Contingent				
Debtor 1	only	☐ Unliquidated	d			
Debtor 2	only	☐ Disputed				
Debtor 1	and Debtor 2 only	Type of PRIOR	RITY unsecured claim:			
☐ At least o	one of the debtors and anothe	r Domestic su	upport obligations			
☐ Check if	this claim is for a commun	ity debt Taxes and o	certain other debts you owe	the government		
	subject to offset?	_	leath or personal injury whil	e you were intoxicated		
■ No		☐ Other. Spec	sify			
□ Yes		•	-			

Debtor 1 Jenkins, Jerry L		Case number (f known)					
2.2	MDHS (p) Priority Creditor's Name	Last 4 digits of account number	\$0.00	\$0.00	\$0.00		
	PO Box 352 Jackson, MS 39205-0352	When was the debt incurred?					
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that app	ly				
W	ho incurred the debt? Check one.	☐ Contingent					
	Debtor 1 only	☐ Unliquidated					
	Debtor 2 only	☐ Disputed					
	Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:					
	At least one of the debtors and another	■ Domestic support obligations					
	Check if this claim is for a community debt	☐ Taxes and certain other debts you owe the government	ent				
Is	the claim subject to offset?	\square Claims for death or personal injury while you were int	oxicated				
	No	Other. Specify					
	l Yes						
2.3	Mississippi Department of Revenue	Last 4 digits of account number	\$75.00	\$75.00	\$0.00		
	Priority Creditor's Name	When was the debt incurred?					
	PO Box 22808 Jackson, MS 39225-2808						
14/	Number Street City State Zip Code ho incurred the debt? Check one.	As of the date you file, the claim is: Check all that app	ly				
	_	☐ Contingent					
	Debtor 1 only	☐ Unliquidated					
_	Debtor 2 only	Disputed					
	Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:					
	At least one of the debtors and another	Domestic support obligations					
	Check if this claim is for a community debt	Taxes and certain other debts you owe the government					
_	the claim subject to offset?	☐ Claims for death or personal injury while you were int	oxicated				
	· · · ·	☐ Other. Specify					
	No I Yes	Other. Specify					
Part 2:	List All of Your NONPRIORITY Unsecu	red Claims					
3. Do	any creditors have nonpriority unsecured claim	s against you?					
	No. You have nothing to report in this part. Submit	this form to the court with your other schedules.					
•	Yes.						
uns	ecured claim, list the creditor separately for each cl	alphabetical order of the creditor who holds each claim aim. For each claim listed, identify what type of claim it is. I creditors in Part 3 If you have more than three conscious.	Oo not list claims a	Iready included in Part	1. If more		

Total claim

Debto	or 1 Jenkins, Jerry L		Case number (f known)	
4.1	Camp Shelby Federal Credit Union Nonpriority Creditor's Name	Last 4 digits of account number	0PRA	\$3,476.00
	Nonpholity Creditor's Name	When was the debt incurred?	2014-12-04	
	Warehouse Ave Bldg 82 Camp Shelby, MS 39407			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin		
	Yes	■ Other. Specify CreditLine	account	
4.2	Camp Shelby Federal Credit Union Nonpriority Creditor's Name	Last 4 digits of account number	0020	\$1,007.00
	. ,	When was the debt incurred?	2018-06-06	
	Warehouse Ave Bldg 82 Camp Shelby, MS 39407			
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Installment	account	
4.3	Equifax Information Services	Last 4 digits of account number		\$0.00
	Nonpriority Creditor's Name			*
	PO Box 740241	When was the debt incurred?		
	Atlanta, GA 30374-0241			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	\square Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?		ration agreement or divorce that you did not	
	No	report as priority claims Debts to pension or profit-sharin	a plane, and other similar debte	
	■ No □ ∨es	Debts to perision of profit-smalling		
	1 1 7 4 5	- Other Crest. NOTICE ANN	7	

Debto	r 1 Jenkins, Jerry L	Case number (f known)	
4.4	Experian Nonpriority Creditor's Name	Last 4 digits of account number	\$0.00
	Nonphonty Greator's Name	When was the debt incurred?	
	PO Box 2002		
	Allen, TX 75013-2002		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	<u> </u>	_	
	Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Notice only	
4.5	Forrest General Hospital	Last 4 digits of account number	\$250.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	PO Box 16389	when was the debt incurred?	
	Hattiesburg, MS 39404-6389		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical/Health Care	
4.6	Hattiesburg Clinic	Last 4 digits of account number 2408	\$43.00
	Nonpriority Creditor's Name		· · · · · ·
	44E C 204h Avra	When was the debt incurred? 2015-01-29	
	415 S 28th Ave Hattiesburg, MS 39401-7246		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	_	Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Open account	
		opoony :	

Debtor	1 Jenkins, Jerry L		Case number (if known)	
4.7	Hattiesburg Clinic Nonpriority Creditor's Name	Last 4 digits of account number	2410	\$7.00
	415 S 28th Ave Hattiesburg, MS 39401-7246	When was the debt incurred?	2015-01-29	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	Contingent		
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Unliquidated☐ Disputed		
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt	Type of NONPRIORITY unsecured ☐ Student loans	I claim: ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No □ Yes	☐ Debts to pension or profit-sharin ☐ Other. Specify Open acco	• •	
4.8	Rozlin Financial Group Nonpriority Creditor's Name	Last 4 digits of account number		\$3,000.00
	PO Box 537 Sycamore, IL 60178-0537	When was the debt incurred?		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	l claim.	
	☐ At least one of the debtors and another ☐ Check if this claim is for a community	Student loans	rolann.	
	debt Is the claim subject to offset?	_	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Collection	account	
4.9	Synchrony Bank/ Jc Penneys Nonpriority Creditor's Name	Last 4 digits of account number	8930	\$690.00
	Attn: Bankruptcy PO Box 956060 Orlando, FL 32801-5060	When was the debt incurred?	2018-12	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
	Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharin	g plane, and other similar debte	
	■ No □ Yes	Other Specify Revolving		
	Tes	Other Specify Revolving	accoulit	

Debtor	¹ Jenkins, Jerry L	Case number (f known)	
4.10	Transunion	Last 4 digits of account number	\$0.00
	Nonpriority Creditor's Name Customer Relations	When was the debt incurred?	
-	PO Box 2000 Chester, PA 19022-2000 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not	
	No	report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Notice only	
4.11	Verizon Wireles	Last 4 digits of account number	\$500.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	PO Box 26055	when was the dept incurred?	
	Minneapolis, MN 55426-0055		
-	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans	
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Telecommunications/Cellular	
Part 3:	List Others to Be Notified About a De	eht That You Already Listed	
5. Use thi is tryir have n	is page only if you have others to be notified ng to collect from you for a debt you owe to s	l about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, i someone else, list the original creditor in Parts 1 or 2, then list the collection agency he nat you listed in Parts 1 or 2, list the additional creditors here. If you do not have additic	re. Similarly, if you
Name ar	nd Address	On which entry in Part 1 or Part 2 did you list the original creditor?	
	Shelby Federal Credit Union	Line 4.2 of (Check one):	
Wareh	enise Collier, CEO/Manager ouse Ave Bldg 82 sburg, MS 39407	■ Part 2: Creditors with Nonpriority Unsecured Cla	iims
паше	sburg, M3 39407	Last 4 digits of account number 0020	
	nd Address	On which entry in Part 1 or Part 2 did you list the original creditor?	
	ecovery V Pine St	Line 4.6 of (Check one):	
	sburg, MS 39401-5060	■ Part 2: Creditors with Nonpriority Unsecured Cla	iims
	3 ,	Last 4 digits of account number 2408	
	nd Address	On which entry in Part 1 or Part 2 did you list the original creditor?	
	ecovery	Line 4.7 of (Check one):	
	V Pine St sburg, MS 39401-5060	■ Part 2: Creditors with Nonpriority Unsecured Cla	iims
		Last 4 digits of account number 2410	
Name ar	nd Address	On which entry in Part 1 or Part 2 did you list the original creditor?	

Official Form 106 E/F

Line 4.5 of (Check one):		
Line 4.5 of (Check one).	□ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims	
Last 4 digits of account number		
On which entry in Part 1 or Part 2 d Line <u>4.5</u> of (<i>Check one</i>):	id you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
Last 4 digits of account number		
On which entry in Part 1 or Part 2 d Line 4.6 of (<i>Check one</i>):	id you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
Last 4 digits of account number	2408	
On which entry in Part 1 or Part 2 d Line <u>4.7</u> of (<i>Check one</i>):	id you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
Last 4 digits of account number	2410	
On which entry in Part 1 or Part 2 d Line 2.1 of (<i>Check one</i>): Last 4 digits of account number	id you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
On which entry in Part 1 or Part 2 d Line 4.9 of (<i>Check one</i>): Last 4 digits of account number	id you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims 8930	
On which entry in Part 1 or Part 2 d Line 4.9 of (<i>Check one</i>):	id you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims 8930	
Line 4.11 of (<i>Check one</i>):	id you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
	On which entry in Part 1 or Part 2 d Line 4.5 of (Check one): Last 4 digits of account number On which entry in Part 1 or Part 2 d Line 4.6 of (Check one): Last 4 digits of account number On which entry in Part 1 or Part 2 d Line 4.7 of (Check one): Last 4 digits of account number On which entry in Part 1 or Part 2 d Line 2.1 of (Check one): Last 4 digits of account number On which entry in Part 1 or Part 2 d Line 4.9 of (Check one): Last 4 digits of account number On which entry in Part 1 or Part 2 d Line 4.9 of (Check one): Last 4 digits of account number On which entry in Part 1 or Part 2 d Line 4.9 of (Check one): Last 4 digits of account number	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.5 of (Check one): □ Part 2: Creditors with Priority Unsecured Claims □ Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.6 of (Check one): □ Part 1: Creditors with Priority Unsecured Claims □ Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number 2408 On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.7 of (Check one): □ Part 1: Creditors with Priority Unsecured Claims □ Part 2: Creditors with Nonpriority Unsecured Claims □ Part 2: Creditors with Nonpriority Unsecured Claims □ Part 2: Creditors with Priority Unsecured Claims □ Part 2: Creditors with Nonpriority Unsecured Claims □ Part 2: Creditors with Priority Unsecured Claims □ Part 2: Creditors with Nonpriority Unsecured Claims □ Part 2: Creditors with Nonpriority Unsecured Claims □ Part 2: Creditors with Priority Unsecured Claims □ Part 2: Creditors with Nonpriority Unsecured Claims □ Part 2: Creditors with Nonpriorit

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 2,875.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 2,875.00
				Total Claim
T. (.)	6f.	Student loans	6f.	\$ 0.00
Total claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00

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Debtor 1 Jenkins, Jerry L

Gi. Other. Add all other nonpriority unsecured claims. Write that amount here.

Gi. Total Nonpriority. Add lines 6f through 6i.

Case number (f known)

S. 8,973.00

6j. \$ 8,973.00

Fill in this information to identify your case:						
Debtor 1	Jerry L Jenkins					
	First Name	Middle Name	Last Name]	
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name]	
United States Bankruptcy Court for the:		SOUTHERN DISTRICT	OF MISSISSIPPI, SOUTHER	N DIVISION		
Case number (if known)						Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person o	r company with Name, Number	whom you have the	e contract or lease	State what the contract or lease is for
2.1		,	,,,		
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.3					_
	Name				
	Number	Street			_
	City		State	ZIP Code	<u> </u>
2.4	City		Otate	Zii Code	
2.7	Name				_
					<u></u>
	Number	Street			
	City		State	ZIP Code	-
2.5					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	<u> </u>

Official Form 106G

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	this information to identi	ry your case.			
Debtor 1	Jerry L Jenkins First Name	Middle Nosse	Lost Nama		
Debtor 2	First Name	Middle Name	Last Name	1	
Spouse if, filing)	First Name	Middle Name	Last Name		
Jnited States E	Bankruptcy Court for the:	SOUTHERN DISTRICT	OF MISSISSIPPI, SOU	THERN DIVISION	
Case number					☐ Check if this is an
	orm 106H e H: Your Cod	ebtors			amended filing
1. Do you ■ No □ Yes	nave any codebtors? (If	you are filing a joint case, do	o not list either spouse as	s a codebtor.	
		lived in a community pro			tates and territories include Arizona
■ No. Go		se, or legal equivalent live w	ith you at the time?		
line 2 agai	n as a codebtor only if the nedule E/F (Official Form	nat person is a guarantor	or cosigner. Make sure	you have listed the cre	ith you. List the person shown inditor on Schedule D (Official For E/F, or Schedule G to fill out
	mn 1: Your codebtor , Number, Street, City, State and 2	IIP Code		Column 2: The cred Check all schedules	itor to whom you owe the debt that apply:
3.1				☐ Schedule D, line	
Name				□ Schedule E/F, lin	ne
				☐ Schedule G, line	
Numb City	per Street	State	ZIP Code	_	
3.2				☐ Schedule D, line	
Name	9			□ Schedule E/F, lin □ Schedule G, line	
Numb	per Street	Chata	ZIP Code	_	
City		State	VID (:000		

Fill	in this information to identify your cas	se:						
Del	otor 1 Jerry L Jenki	ins						
	otor 2				-			
Uni	ted States Bankruptcy Court for the:	SOUTHERN DISTRIC		,				
	se number lown)						J	etition chapter 13
0	fficial Form 106I					MM / DD/ Y		
S	chedule I: Your Inco	me				, 22, .		12/15
sup _i spo atta	es complete and accurate as possibility in correct information. If you a use. If you are separated and your ch a separate sheet to this form. On the correct Describe Employment	re married and not filing spouse is not filing with	g jointly, and your : n you, do not inclu	spouse is I de informat	ving wit	th you, includ ut your spous	le information a se. If more spac	bout your e is needed,
1.	Fill in your employment information.		Debtor 1			Debtor 2	or non-filing sp	ouse
	If you have more than one job, attach a separate page with	Employment status*	■ Employed			☐ Emplo	•	
	information about additional employers.	Occupation	☐ Not employed See Schedule	Attached.		☐ Not er	nployed	
	Include part-time, seasonal, or self-employed work.	Employer's name	See Schedule	Attacheu		_		
	Occupation may include student or homemaker, if it applies.							
		How long employed th		tachment f	or Addit	ional Employ	ment Informatio	on
Par	Give Details About Mont	hly Income						
	mate monthly income as of the dat ss you are separated.	e you file this form. If yo	ou have nothing to re	port for any	ine, write	e \$0 in the spa	ce. Include your	non-filing spouse
	u or your non-filing spouse have more ce, attach a separate sheet to this form		ine the information f	or all employ	ers for th	nat person on t	the lines below. If	you need more
					For	Debtor 1	For Debtor 2 non-filing spo	
2.	List monthly gross wages, salary deductions). If not paid monthly, cal			2.	\$	3,206.72	\$	N/A
3.	Estimate and list monthly overting	ne pay.		3.	+\$	0.00	+\$	N/A
4.	Calculate gross Income. Add line	2 + line 3.		4.	\$3	3,206.72	\$ N	1/A

Official Form 106l Schedule I: Your Income page 1

Deb	otor 1	Jenkins, Jerry L	_	(Case	number (if kn	own)				
					Foi	Debtor 1			Debtor 2 filing sp		
	Cop	by line 4 here	4.		\$_	3,206	.72	\$		N/A	-
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a	١.	\$	518	.14	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b		\$	221		\$		N/A	-
	5c.	Voluntary contributions for retirement plans	5c	:.	\$	50	.00	\$		N/A	-
	5d.	Required repayments of retirement fund loans	5d	l.	\$_	0	.00	\$		N/A	_
	5e.	Insurance	5e		\$_	142		\$		N/A	_
	5f.	Domestic support obligations	5f.		\$_	285		\$		N/A	_
	5g.	Union dues	5g		\$_		.00	\$		N/A	_
	5h.	Other deductions. Specify:	5h	1.+	\$_		.00	+ \$		N/A	-
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$_	1,217	.20	\$		N/A	-
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_	1,989	.52	\$		N/A	-
8.	List 8a.	t all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a	ı	\$	0	.00	\$		N/A	
	8b.	Interest and dividends	8b		\$-		.00	\$		N/A	-
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	: 8c	·.	\$.00	\$		N/A	-
	8d.	Unemployment compensation	8d	l.	\$	0	.00	\$		N/A	-
	8e.	Social Security	8e	÷.	\$_	0	.00	\$		N/A	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.		\$	0	.00	\$		N/A	
	8g.	Pension or retirement income	— 8g	١.	\$_		.00	\$		N/A	_
	8h.	Other monthly income. Specify:	8h	1.+	\$_	0	.00	+ \$		N/A	_
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	S	0	.00	\$		N/A	
10.	Cal	culate monthly income. Add line 7 + line 9.	10.	\$		1,989.52	+ \$		N/A	= \$	1,989.52
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	L			,	L				,
11.	Incl othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your der friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not avecify:	epende				•		ıle J. 11.	+\$	0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The rester that amount on the Summary of Schedules and Statistical Summary of Certain							L	\$	1,989.52
13.	Do :	you expect an increase or decrease within the year after you file this form No.	?								y income
		Yes. Explain:									

Official Form 106l Schedule I: Your Income page 2

Debtor 1 Jenkins , Jerry L Case number (if known)

Official Form B 6I Attachment for Additional Employment Information

Debtor		
Occupation	Facility maintenance repair	
Name of Employer	Camp Shelby	
How long employed	11 years	
Address of Employer	PO Box 267 Jackson, MS 39205-0267	
Debtor		
Occupation	Housekeeping	
Name of Employer	ServiceMaster	
How long employed	6 years	
Address of Employer	216 W Fifth Ave Petal. MS 39465-2004	

Fill	in this information to identify you	r case:				
Deb	Jerry L Jenkii	ns			k if this is: An amended filing	
	otor 2 ouse, if filing)				•	ing postpetition chapter 13 following date:
Unit	ted States Bankruptcy Court for the:	SOUTHERN DISTRICT OF MISSISOUTHERN DIVISION	SSIPPI,	-	MM / DD / YYYY	
	e number nown)					
	fficial Form 106J	_				
Be info		ossible. If two married people are to led, attach another sheet to this fo				
	t 1: Describe Your Househo	old				
1.	Is this a joint case? ■ No. Go to line 2. □ Yes. Does Debtor 2 live in □ No	a separate household?				
	= ::-	file Official Form 106J-2, Expenses for	or Separate Househ	oldof Debtor	2.	
2.	Do you have dependents?	■ No				
	Do not list Debtor 1 and Debtor 2.	Yes. Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state the dependents names.					☐ No ☐ Yes
3.	Do your expenses include expenses of people other tha yourself and your dependent					☐ Yes
Est exp		g Monthly Expenses Ir bankruptcy filing date unless yo nkruptcy is filed. If this is a supple				
val		n-cash government assistance if y e included it on Schedule I: Your Ir			Your expe	enses
4.	The rental or home ownershi payments and any rent for the g	p expenses for your residence. Incround or lot.	clude first mortgage	4. \$		300.00
	If not included in line 4:					
		air, and upkeep expenses		4a. \$ 4b. \$ 4c. \$		0.00 0.00 0.00
5.	4d. Homeowner's association Additional mortgage paymen	n or condominium dues ts for vour residence, such as hom	e equity loans	4d. \$ 5. \$		0.00

Deb	tor 1 _ Jenkins, Jerry L	Case number (if known)	
6.	Utilities:		
	6a. Electricity, heat, natural gas	6a. \$	200.00
	6b. Water, sewer, garbage collection	6b. \$	0.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$	100.00
	6d. Other. Specify:	6d. \$	0.00
	Food and housekeeping supplies	7. \$	400.00
	Childcare and children's education costs	8. \$	0.00
	Clothing, laundry, and dry cleaning	9. \$	50.00
).	Personal care products and services	10. \$	50.00
1.	Medical and dental expenses	11. \$	50.00
2.	Transportation. Include gas, maintenance, bus or train fare.	·	
	Do not include car payments.	12. \$	150.00
3.	Entertainment, clubs, recreation, newspapers, magazines, and books	13. \$	25.00
ŀ.	Charitable contributions and religious donations	14. \$	0.00
5.	Insurance.		
	Do not include insurance deducted from your pay or included in lines 4 or 2	20.	
	15a. Life insurance	15a. \$	0.00
	15b. Health insurance	15b. \$	0.00
	15c. Vehicle insurance	15c. \$	180.00
	15d. Other insurance. Specify:	15d. \$	0.00
i.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or	20.	
	Specify:	16. \$	0.00
.	Installment or lease payments:		
	17a. Car payments for Vehicle 1	17a. \$	335.00
	17b. Car payments for Vehicle 2	17b. \$	0.00
	17c. Other. Specify:	17c. \$	0.00
	17d. Other. Specify:	17d. \$	0.00
.	Your payments of alimony, maintenance, and support that you did not		0.00
	deducted from your pay on line 5, Schedule I, Your Income (Official Fo		0.00
9.	Other payments you make to support others who do not live with you.	\$	0.00
	Specify:	19.	
).	Other real property expenses not included in lines 4 or 5 of this form o		
	20a. Mortgages on other property	20a. \$	0.00
	20b. Real estate taxes	20b. \$	0.00
	20c. Property, homeowner's, or renter's insurance	20c. \$	0.00
	20d. Maintenance, repair, and upkeep expenses	20d. \$	0.00
	20e. Homeowner's association or condominium dues	20e. \$	0.00
١.	Other: Specify: IRS payment plan	21. +\$	120.00
,	Calculate your monthly expenses		
	22a. Add lines 4 through 21.	\$	1,960.00
	22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official For	· · <u></u>	1,300.00
	22c. Add line 22a and 22b. The result is your monthly expenses.	\$	1,960.00
3.	Calculate your monthly net income.		J
	23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	1,989.52
	23b. Copy your monthly expenses from line 22c above.	23b\$	1,960.00
	• • •	·	
	23c. Subtract your monthly expenses from your monthly income.		22 = 2
	The result is your monthly net income.	23c. \[\$	29.52
1.	Do you expect an increase or decrease in your expenses within the year For example, do you expect to finish paying for your car loan within the year or do you modification to the terms of your mortgage?		e or decrease because of a
	■ No.		
	■ No.		

Fill in this i	nformation to identify yo	our case:			
Debtor 1	Jerry L Jenkins				
	First Name	Middle Name	Last Name		
Debtor 2	First Name	Marialla Massa	Last Name		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT	OF MISSISSIPPI, SOUTHE	RN DIVISION	
Case number					
(if known)					☐ Check if this is an
					amended filing
Official For	m 106Dec				
	-	n Individua	l Dobtor's Sak	andulas	
Declara	HOH ABOUL A	an marvidua	l Debtor's Sch	iedules	12/15
ears, or both. 1	ís U.S.C. §§ 152, 1341, 19		, ,		or imprisonment for up to 20
Did you pa	ay or agree to pay some	one who is NOT an attor	ney to help you fill out bank	cruptcy forms?	
■ No					
☐ Yes.	Name of person				ruptcy Petition Preparer's Notice, and Signature (Official Form 119)
				Declaration,	and Signature (Official Form 119)
	alty of perjury, I declare to true and correct.	that I have read the sum	mary and schedules filed wi	ith this declaration a	and
X /s/ Jer	ry L Jenkins		Х		
	L Jenkins ure of Debtor 1		Signature of De	ebtor 2	
Date	October 31, 2019		Date		

	Fill in this	s information to identi	fy your case:				
Dob			ry your case.				
Deb	IOI I	Jerry L Jenkins First Name	Middle Name	Last Name			
	tor 2 use if, filing)	First Name	Middle Name	Last Name			
				OF MISSISSIPPI, SOUTHERN DIVISION			
Onit	eu States Bani	kruptcy Court for the:	300THERN DISTRICT	OF MISSISSIFFI, SOUTHERN DIVISION			
Case (if kno	e number					Check if amende	this is an
		m 106Sum	and Liabilities ar	nd Certain Statistical Informati	on	40	NA E
Be as	s complete an mation. Fill ou original form	nd accurate as possiblut all of your schedule	e. If two married people a es first; then complete the	re filing together, both are equally responsible information on this form. If you are filing am the box at the top of this page.	e for sup	plying co	
						Your ass Value of v	ets vhat you own
1.		B: Property (Official Fo				\$	0.00
	1b. Copy line	62, Total personal pro	perty, from Schedule A/B			\$	34,336.66
	1c. Copy line	63, Total of all property	y on Schedule A/B			\$	34,336.66
Part	2: Summa	rize Your Liabilities					
						Your liab Amount y	
2.			aims Secured by Property (mn AAmount of claim, at the	Official Form 106D) bottom of the last page of Part 1 of Schedule D.		\$	30,904.00
3.			Unsecured Claims (Official 1 (priority unsecured claim	Form 106E/F) s) from line 6e 3 5chedule E/F		\$	2,875.00
	3b. Copy the	total claims from Part	2 (nonpriority unsecured cl	aims) from line 6j o 3 chedule E/F		\$	8,973.00
				Your total liab	ilities \$		42,752.00
Part	3: Summa	rize Your Income and	Expenses				
4.		our Income(Official Foombined monthly incom				\$	1,989.52
5.		Your Expenses (Official onthly expenses from lin				\$	1,960.00
Part	4: Answer	These Questions for	Administrative and Statis	tical Records			
6.		•	er Chapters 7, 11, or 13? on this part of the form. Che	ck this box and submit this form to the court with	your other	schedules	S.
7.	YesWhat kind of	f debt do you have?					
	■ Your de	ebts are primarily cons	sumer debts. Consumer d	ebts are those "incurred by an individual primarily	for a pers	onal, famil	y, or household

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C.§ 159.

☐ Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 1 Jenkins, Jerry L Case number (if known) From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 8.

122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

3,076.13

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total c	laim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	2,875.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	2,875.00

	Fill in this	information to identi	fy your case:			
Debt	or 1	Jerry L Jenkins				
Dobt	or 2	First Name	Middle Name	Last Name	}	
Debt (Spou	or ∠ se if, filing)	First Name	Middle Name	Last Name		
Unite	ed States Bar	nkruptcy Court for the:	SOUTHERN DISTRICT O	OF MISSISSIPPI, SOUTHER	N DIVISION	
Case	e number					
(if kno	wn)					Check if this is an amended filing
Οπ	isial Es	waa 407				
	icial For tement		Affairs for Individ	luals Filing for B	ankruptcy	4/1:
inforr	mation. If me	ore space is needed,	ole. If two married people are attach a separate sheet to th			
if kn	own). Answe	er every question.				
Part	1: Give D	etails About Your Ma	rital Status and Where You	Lived Before		
1. \	What is your	current marital statu	s?			
ı	☐ Married					
-	Not mar	ried				
2. I	During the la	st 3 years, have you	lived anywhere other than w	here you live now?		
	■ No					
İ	_	t all of the places you liv	ed in the last 3 years. Do not i	nclude where you live now.		
	Debtor 1 Pri	ior Address:	Dates Debtor 1	lived Debtor 2 Prior Ad	dress:	Dates Debtor 2
			er live with a spouse or lega ifornia, Idaho, Louisiana, Nev			
	No					
İ	■ No □ Yes. Ma	ke sure you fill out <i>Sch</i> e	edule H: Your Codebtors (Offic	cial Form 106H).		
		•	,	,		
Part	2 Explain	n the Sources of You	r Income			
I	Fill in the tota	I amount of income yo	nployment or from operating u received from all jobs and a lave income that you receive to	Il businesses, including part-t	ime activities.	ndar years?
	□ No					
ľ	_	in the details.				
			D . ()		D.11. 0	
			Debtor 1 Sources of income	Gross income	Debtor 2	Gross income
			Check all that apply.	(before deductions and exclusions)	Sources of income Check all that apply.	(before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$27,086.62	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

Debtor 1 Jenkins, Jerry L				ry L		Case number (if known)					
					Debtor 1			Debtor 2			
			Sources of income Check all that apply.			Sources of inco	Gross income (before deductions and exclusions)				
/ January 1 to Docombor 21 2019 \		■ Wages, commissions, bonuses, tips			☐ Wages, com bonuses, tips	missions,					
					☐ Operating a business			☐ Operating a	business		
			ar year bet December 3		■ Wages, commissions, bonuses, tips		\$29,705.00	☐ Wages, com bonuses, tips	missions,		
					☐ Operating a business			☐ Operating a	business		
	■ N	Ю	ource and th	C	Debtor 1 Sources of income Describe below.	Gros each	ss income from	Debtor 2 Sources of inco Describe below.		Gross income (before deductions	
Pari	+ 3:	l ict	Cartain Pa	yments Vou	Made Before You Filed for	exclu	re deductions and sions)			and exclusions)	
	Are eit	her	Debtor 1's Neither De	or Debtor 2 ebtor 1 nor ['s debts primarily consume Debtor 2 has primarily consi personal, family, or household	r debts? umer deb	ts. Consumer debts	are defined in 11 U	.S.C. § 101(8) as "incurred by an	
			_	90 days befo	ore you filed for bankruptcy, did	d you pay	any creditor a total o	f \$6,825* or more?			
			□ No.	Go to line							
			Yes	creditor. D payments t	each creditor to whom you pai o not include payments for do o an attorney for this bankrupt t on 4/01/22 and every 3 years	omestic su cy case.	upport obligations, s	uch as child suppor	t and alimor		
	■ Y	es.			or both have primarily consore you filed for bankruptcy, did			f \$600 or more?			
			■ No.	Go to line	7.						
			□ Yes		each creditor to whom you pai for domestic support obligation optcy case.			,	•		
	Credi	tor's	Name and	d Address	Dates of paym	ent	Total amount paid	Amount you still owe	Was this	payment for	
	Insider: which y	s inc	clude your re are an office	elatives; any ç er, director, pe	bankruptcy, did you make general partners; relatives of a erson in control, or owner of 20 prietor. 11 U.S.C. § 101. Include	ny genera 0% or mor	nt on a debt you ov I partners; partnersh e of their voting secu	wed anyone who w ips of which you are urities; and any mana	a general pa aging agent,	artner; corporations of including one for a	
	□ N										
			. ,	ents to an ins							
	Inside	er's l	Name and	Address	Dates of paym	ent	Total amount	Amount you	Reason fo	or this payment	

Official Form 107

Del	otor 1 _ Jenkins, Jerry L	Case number (if known)				
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe		
	Jayla Jenkins (address unknown)	Monthly through payroll deduction	\$280.00	\$0.00	Child sup	port
8.	Within 1 year before you filed for bankrupto insider? Include payments on debts guaranteed or cosig		rments or transfer ar	ny property on ac	count of a dek	ot that benefited an
	No					
	☐ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment itor's name
Pai	t 4: Identify Legal Actions, Repossession	s, and Foreclosures				
9.	Within 1 year before you filed for bankrupto List all such matters, including personal injury of and contract disputes. No					
	Yes. Fill in the details.	Notice of the case	Court or oronov		Status of th	
	Case title Case number	Nature of the case	Court or agency		Status of th	e case
10.	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below.		erty repossessed, fo	reclosed, garnish	ed, attached,	seized, or levied?
	Creditor Name and Address	Describe the Property		Date		Value of the
	Ordator Name and Address	Explain what happene	d	Duic		property
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment becan a No Yes. Fill in the details.	tcy, did any creditor, inc		ancial institution,	set off any am	ounts from your
	Creditor Name and Address	Describe the action the	e creditor took	Date taken	action was	Amount
12.	Within 1 year before you filed for bankruptc court-appointed receiver, a custodian, or an □ No □ Yes		erty in the possessic	on of an assignee	for the benefi	t of creditors, a
Pai	t 5: List Certain Gifts and Contributions					
13.	Within 2 years before you filed for bankrupt ■ No □ Yes. Fill in the details for each gift.	cy, did you give any gift	s with a total value o	of more than \$600	per person?	
	Gifts with a total value of more than \$600 p person	er Describe the gifts		Dates the g	s you gave ifts	Value
	Person to Whom You Gave the Gift and Address:					

Del	otor 1 <u>Jenkins, Jerry L</u>		Ca	ase number (i	f known)	
4.	Within 2 years before you filed for bank	ruptcy, c	lid you give any gifts or contributions	with a total v	alue of more than \$6	600 to any charity?
	Yes. Fill in the details for each gift or c	ontributio	on.			
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Coo	total	Describe what you contributed		Dates you contributed	Value
Par	rt 6: List Certain Losses					
5.	Within 1 year before you filed for bankru or gambling?	uptcy or	since you filed for bankruptcy, did you	u lose anythi	ng because of theft,	fire, other disaster,
	■ No					
	☐ Yes. Fill in the details.					
	Describe the property you lost and how the loss occurred	Include	ibe any insurance coverage for the los e the amount that insurance has paid. Lis nce claims on line 33 of Schedule A/B: Pr	st pending	Date of your loss	Value of property lost
	Total Control Designation Transfer		nice claims on line 33 of 3chedule A/D. 11	operty.		
Par	t 7: List Certain Payments or Transfer	rs				
16.	Within 1 year before you filed for bankru consulted about seeking bankruptcy or Include any attorneys, bankruptcy petition p	preparir	ng a bankruptcy petition?			y to anyone you
	□ No					
	Yes. Fill in the details.					
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not N	You	Description and value of any proper transferred	rty	Date payment or transfer was made	Amount of payment
	Rettig Law Group PLLC PO Box 17173 Hattiesburg, MS 39404-7173	. 00			9/20/2019	\$650.00
17.	Within 1 year before you filed for bankru promised to help you deal with your cre Do not include any payment or transfer that	ditors o	r to make payments to your creditors?		transfer any propert	y to anyone who
	_	,				
	No					
	Yes. Fill in the details.		Description and value of any management		Data waymant an	Amazont of
	Person Who Was Paid Address		Description and value of any proper transferred	rty	Date payment or transfer was made	Amount of payment
18.	transferred in the ordinary course of you include both outright transfers and transfers gifts and transfers that you have already list	ur busin s made a	ess or financial affairs? s security (such as the granting of a secur			
	■ No □ Yes. Fill in the details.					
	Person Who Received Transfer		Description and value of	Describe	ny property or	Date transfer was
	Address		Description and value of property transferred		ny property or received or debts change	made
	Person's relationship to you					

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a

Case number (if known)

	■ No □ Yes. Fill in the details.						
	Name of trust	Description and	value of the pro	perty transf	ferred	Date Transfer was made	
Par	t 8: List of Certain Financial Accounts, Ins	struments, Safe Deposit	Boxes, and Sto	rage Units			
20.	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.						
	☐ Yes. Fill in the details.						
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	• • • • • • • • • • • • • • • • • • • •		Date account was closed, sold, moved, or transferred	Last balance before closing or transfer	
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?						
	■ No						
	☐ Yes. Fill in the details.						
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)		Who else had access to it? Address (Number, Street, City, State and ZIP Code)		the contents	Do you still have it?	
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?						
	■ No						
	Yes. Fill in the details.						
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	to it?	Address (Number, Street, City, State		the contents	Do you still have it?	
Par	t 9: Identify Property You Hold or Control	for Someone Else					
23.	Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.						
	■ No □ Yes. Fill in the details.						
	Owner's Name Address (Number, Street, City, State and ZIP Code)		Where is the property? (Number, Street, City, State and ZIP Code)		the property	Value	
Par	t 10: Give Details About Environmental Info	ormation					

Debtor 1 Jenkins, Jerry L

- toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

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Del	otor 1	Jenkins, Jerry L		Cas	se number (if known)				
24.	Has	Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?							
		No Yes. Fill in the details.							
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice			
25.	Hav	Have you notified any governmental unit of any release of hazardous material?							
		No Yes. Fill in the details.							
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice			
26.	Hav	lave you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.							
		No Yes. Fill in the details.							
		se Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nat	ure of the case	Status of the case			
Pai	rt 11:	Give Details About Your Business or (Connections to Any Business						
27.	Witl	Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?							
		☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time							
		☐ A member of a limited liability comp	any (LLC) or limited liability partnership	p (LL	P)				
		☐ A partner in a partnership							
		☐ An officer, director, or managing executive of a corporation							
		☐ An owner of at least 5% of the voting or equity securities of a corporation							
		No. None of the above applies. Go to Part 12.							
		_							
		siness Name	Describe the nature of the business		Employer Identification number				
		dress mber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper		Do not include Social Security number or ITIN. Dates business existed				
28.		Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.							
		No							
		Yes. Fill in the details below.							
		me dress mber, Street, City, State and ZIP Code)	Date Issued						
Pai	rt 12:	Sign Below							
true ban	and krup	ad the answers on this Statement of Final correct. I understand that making a false tcy case can result in fines up to \$250,00. §§ 152, 1341, 1519, and 3571.	e statement, concealing property, or ob	tainir	ng money or property by fraud in				
		ry L Jenkins	Signature of Debtor 2						
		. Jenkins re of Debtor 1	Signature of Deptor 2						
Dat	te <u>(</u>	October 31, 2019	Date						

Official Form 107

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Debtor 1 _ Jenkins, Jerry L	Case number (if known)
Did you attach additional pages to Your Statement of Financial Affairs for Individuals ■ No □ Yes	Filing for Bankruptcy (Official Form 107)?
Did you pay or agree to pay someone who is not an attorney to help you fill out bank No □ Yes. Name of Person Attach the Bankruptcy Petition Preparer's Notice, Declara	

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Southern District of Mississippi, Southern Division

Southern Dis	strict of Mississippi, South	ern Division						
n re Jenkins, Jerry L		Case No.						
	Debtor(s)	Chapter						
DISCLOSURE OF COM	PENSATION OF ATTO	ORNEY FOR I	EBTOR					
Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:								
For legal services, I have agreed to accept		\$	650.00					
Prior to the filing of this statement I have receive			650.00					
Balance Due			0.00					
The source of the compensation paid to me was:								
■ Debtor □ Other (specify):								
The source of compensation to be paid to me is:								
■ Debtor □ Other (specify):								
■ I have not agreed to share the above-disclosed co firm.	■ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.							
☐ I have agreed to share the above-disclosed compet copy of the agreement, together with a list of the				firm. A				
In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:								
a. Analysis of the debtor's financial situation, and restb. Preparation and filing of any petition, schedules, sc. Representation of the debtor at the meeting of creedd. [Other provisions as needed]	statement of affairs and plan which	ch may be required;		otcy;				
By agreement with the debtor(s), the above-disclosed fee does not include the following service: Fees for credit counseling course, personal financial mangement course, or bankruptcy filing fee. Further, the above disclosed fee does not include representation of the Debtor in any adversary proceedings, objections to discharge, audits, 2004 exams, judicial lien avoidances, conversion to another chapter, relief from stay action tax discharge matters, student loans, stay violations, consumer litigation, or other related matters.								
	CERTIFICATION							
I certify that the foregoing is a complete statement of his bankruptcy proceeding.	any agreement or arrangement f	or payment to me for	representation of the deb	tor(s) in				
October 31, 2019	/s/ Jonathan M.	Rettig						
Date	Jonathan M. Ret							
	Signature of Attorn Rettig Law Grou							
	PO Box 17173							
	Hattiesburg, MS	39404-7173						
	(601) 336-0603 jr@rettiglawgrou	Fax: (601) 336-166	3					
	<u>Ji @rettiglawgrot</u> Name of law firm	up.com						